## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004                     |  |  |                     |                                   |                       |                     |     |                     | 10/594409              |    |                     |                        |
|--|--|--|---------------------|-----------------------------------|-----------------------|---------------------|-----|---------------------|------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) |  |  |                     |                                   |                       |                     |     | SMALL ENTITY TYPE   |                        | OR | OTHER<br>SMALL E    |                        |
| u.s  | . NATIONAL                                     | STAGE FEES                                   |                     |                                   |                       |                     | ]   | RATE                | FEE                    |    | RATE                | FEE                    |
| BASIC FEE                                      |  |  |                     |                                   |                       |                     | 1   | BASIC FEE           |                        | OR | BASIC FEE           | 300                    |
| EXAMINATION FEE                                |  |  |                     |                                   |                       |                     | 1   | EXAM. FEE           |                        |    | EXAM. FEE           | 200                    |
| SEARCH FEE                                     |  |  |                     |                                   |                       |                     | 1   | SEARCH FEE          |                        |    | SEARCH FEE          | 400                    |
| FEE  | FOR EXTRA S                                    | SPEC. PGS.                                   | min                 | nus 100 =                         |                       | / 50 =              | 1   | X \$ 125 =          |                        |    | X \$ 250 =          |                        |
| TOTAL CHARGEABLE CLAIMS                        |  |  | 28 mi               | Z minus 20 = *                    |                       | $\overline{\gamma}$ | 1   | X \$ 25 =           |                        | OR | X \$ 50 =           | 400                    |
| INDE   | EPENDENT CL                                    | AIMS   | 4 17                | ninus 3 =                         | *                     | 1                   | 1   | X \$ 100 =          |                        | OR | X \$ 200 =          | 200                    |
| MUL  | TIPLE DEPEN                                    | IDENT CLAIM PRI                              | ESENT               |                                   |                       | <del>-</del>        | 1   | + \$ 180 =          |                        | OR | + \$ 360 =          |                        |
| * If   | the difference                                 | e in column 1 is                             | less than zero      | ວ, enter "(                       | J"∙in cc              | olumn 2             | . L | TOTAL               |                        | OR | TOTAL               | 1500                   |
|  | <u> </u>                                       | (Column 1)  CLAIMS REMAINING                 | AMENDED             | (Colum<br>HIGH<br>NUM             | mn 2)<br>IEST<br>IBER | (Column 3) PRESENT  | 1   | SMALL E             | NTITY  ADDI- TIONAL    | OR | OTHER T             |                        |
| ENT A  |  | AFTER<br>AMENDMENT                           |                     | PREVIO<br>PAID                    |                       | EXTRA               | ] ] | MIL                 | FEE                    |    | - RAIL              | FEE                    |
| AMENDMENT                                      | Total  | *  | Minus               | **                                |                       | =                   | ]   | X \$ 25 =           |                        | OR | X \$ 50 =           |                        |
| AME  | Independent                                    | *  | Minus               | ***                               |                       | =                   | ]   | X \$ 100 =          |                        | OR | X \$ 200 =          |                        |
|  | FIRST PRES                                     | SENTATION OF M                               | MULTIPLE DEPI       | ENDENT (                          | CLAIM                 |                     |     | + \$ 180 =          |                        | OR |                     |                        |
|  |  | _  | TOTAL ADDIT.<br>FEE |                                   | OR                    | TOTAL ADDIT.<br>FEE |     |                     |                        |    |                     |                        |
| ı  |  | (Column 1)                                   |                     | (Colun                            | mn 2)                 | (Column 3)          |     |                     |                        |    |                     |                        |
| NT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |                     | HIGHI<br>NUME<br>PREVIO<br>PAID I | IEST<br>BER<br>OUSLY  | PRESENT<br>EXTRA    |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT                                      | Total  | *  | Minus               | **                                |                       | =                   | 1 [ | X \$ 25 =           |                        | OR | X \$ 50 =           |                        |
| AME  | Independent                                    | *  | Minus               | ***                               |                       | =                   | [   | X \$ 100 =          |                        | OR | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                     |                                   |                       |                     |     | + \$ 180 =          |                        | OR | + \$ 360 =          |                        |
|  |  | -  |                     |                                   |                       |                     | • - | TOTAL ADDIT.<br>FEE |                        | OR | TOTAL ADDIT.<br>FEE |                        |
|  |  |  |                     |                                   |                       |                     |     |                     |                        |    |                     |                        |
| *  | If the entry in coli                           | umn 1 is less than the                       | e entry in column   | 2, write "0" i                    | in columi             | n 3.                |     |                     |                        |    |                     |                        |
| **   | If the "Highest Nu                             | umber Previously Pai<br>umber Previously Pai | aid For" IN THIS SP | PACE is less                      | s than '20            | 0', enter "20",     |     |                     |                        |    |                     |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.